

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mm</i>		<i>04/1/01</i>
O.I.P.E. CLASSIFIER	<i>EW</i>	<i>37</i>	<i>5/1/01</i>
FORMALITY REVIEW	<i>MCS</i>	<i>434</i>	<i>6/6/01</i>
RESPONSE FORMALITY REVIEW	<i>SG</i>	<i>1077</i>	<i>9/1/01</i>

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                        I ..... Interference  
 - (Through numeral)..... Canceled    A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
Final Original	
1	<i>01/1/01</i>
2	<i>2/14/01</i>
3	<i>4/1/01</i>
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If more than 150 claims or 10 actions  
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*010*  
*6/30/01*  
*571-09/14/01*